



UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 1.53(b))</i>	Attorney Docket No.	37505.0202
	First Inventor	Leising et al.
	Title	Silver Vanadium Oxide Provided With A Metal Oxide Coating
	Express Mail Label No.	EU474894443US

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents</i>		Commissioner for Patents ADDRESS TO: Box Patent Application Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 131 /] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 4 /] 5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 3 /] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies
		ACCOMPANYING APPLICATION PARTS 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent 17. <input checked="" type="checkbox"/> Other: Credit Card Forms for \$858.00 and \$40.00

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of the prior application No: /
 Prior application information: Examiner: Group/Art Unit:
 For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label		(Insert Customer No. or Attach bar code label here)		OR <input checked="" type="checkbox"/> Correspondence address below	
NAME		Michael F. Sealise			
		Wilson Greatbatch Technologies, Inc.			
ADDRESS		10,000 Wehrle Drive			
CITY	Clarence	STATE	New York	ZIP CODE	14031
COUNTRY	USA	TELEPHONE	(716) 759-5810	FAX	(716) 759-5074
Name (Print/Type)		Michael F. Sealise		Registration No. (Attorney/Agent) 34,920	
Signature		<i>Michael F. Sealise</i>		Date July 31, 2003	

"Express Mail" Mailing Label Number EU474894443US

Date of Deposit July 31, 2003

I hereby Certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

Michael F. Sealise

FEE TRANSMITTAL for FY 2002

Patent Fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

Application Number	
Filing Date	July 31, 2003
First Named Inventor	Leising et al.
Examiner Name	
Group/Art Unit	
Attorney Docket Number	37505.0202

TOTAL AMOUNT OF PAYMENT (\$880.00)

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)			
<input type="radio"/> Check <input checked="" type="radio"/> Credit Card <input type="radio"/> Money Order <input type="radio"/> Other <input type="radio"/> None Deposit Account: Deposit Account Number: 502460 Deposit Account Name: The Commissioner is hereby authorized to (check all that apply) <input type="radio"/> Charge fee(s) indicated below <input type="radio"/> Charge any fee deficiencies or credit any overpayments <input type="radio"/> Charge any additional fees during pendency of this application. <input type="radio"/> Charge fees indicated below, except for the filing fee to the above-identified deposit account				3. ADDITIONAL FEES			
Large Entity		Small Entity					
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid		
105	130	205	65	Surcharge - late filing fee or oath	\$		
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	\$		
139	130	139	130	Non-English specification	\$		
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	\$		
112	920*	112	920*	Requesting Publication of SIR prior to Examiner Action	\$		
113	1,840*	113	1,840*	Requesting Publication of SIR after Examiner Action	\$		
101 750 201 375	Utility filing fee	115	110	215 55	Extension for reply within first month	\$	
106 330 206 165	Design filing fee	116	410	216 205	Extension for reply within second month	\$	
107 520 207 260	Plant filing fee	117	930	217 465	Extension for reply within third month	\$	
108 750 208 375	Reissue filing fee	118	1,450	218 725	Extension for reply within fourth month	\$	
114 160 214 80	Provisional filing fee	128	1,970	228 985	Extension for reply within fifth month	\$	
SUBTOTAL (1)		119	320	219 160	Notice of Appeal	\$	
2. EXTRA CLAIM FEES FOR UTILITY/REISSUE		120	320	220 160	Filing a brief in support of an appeal	\$	
Extra Fee from Claims below Total Claims /25 /- 20** = /5 / x /18 / = \$90		121	280	221 140	Request for oral hearing	\$	
Independent Claims /3 /- 3** = / / x / / = \$		138	1,510	138 1,510	Petition to institute a public use proceeding	\$	
Multiple dependent / / x / / = \$		140	110	240 55	Petition to revive - unavoidable	\$	
Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description		141	1,300	241 650	Petition to revive - unintentional	\$	
		142	1,300	242 650	10 advance copies	\$	
					Utility issue fee (or reissue)	\$	
103 18 203 9	Claims in excess of 20	143	470	243 235	Design issue fee	\$	
102 84 202 42	Independent claims in excess of 3	144	630	244 315	Plant issue fee	\$	
104 280 204 140	Multiple dependent claim if not paid	122	130	122 130	Petitions to the Commissioner	\$	
109 84 209 42	**Reissue independent claims over original patent	123	50	123 50	Processing fee under 37 CFR 1.17(q)	\$	
110 18 210 9	**Reissue claims in excess of 20 and over original patent	126	180	126 180	Submission of Information Disclosure Statement	\$	
SUBTOTAL (2)		581	40	581 40	Recording each patent assignment per property (times number of properties)	\$40	
SIGNATURE: Michael F. Scalise		146	750	246 375	Filing a submission after final rejection(37 CFR 1.129(a))	\$	
Michael F. Scalise Reg. No. 34,920		149	750	249 375	For each add'l invention to be examined(37 CFR 1.129(b))	\$	
DATE: July 31, 2003 Telephone: (716) 759-5810		179	750	279 375	Request For Continued Examination (RCE)	\$	
		169	900	169 900	Request for Expedited Examination of a design appln.	\$	
		Other fee (specify)				\$	
		*Reduced by basic filing fee paid				\$	
		SUBTOTAL (3)				\$40	